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ARTICLE

1 **Surviving COVID-19 Pandemic:
The Role of Social Media
and Family Social Capital in Promoting
a Healthy Lifestyle in Indonesia**

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ABSTRACT

1 Promotion of a healthy lifestyle amid the COVID-19 pandemic in Indonesia is an important part of disease prevention. Public outreach via social media shapes the public perception of the government's campaign to stop COVID-19 spread. This study investigates the impact of social media and family social capital on the promotion of a healthy lifestyle. The study covered a sample of 165 women in Indonesia; it was conducted during the COVID-19 pandemic. Female respondents were selected because of their essential role in the family. The results show that the awareness of a healthy lifestyle is most likely affected by family social capital rather than social media use. Greater cohesion and interaction among family members, less family conflict, and better paternal control contributed to stronger family social capital. These findings contribute to a better understanding of how a healthy lifestyle can help families survive the pandemic.

KEYWORDS

promotion, healthy lifestyle, social media use, family social capital, COVID-19

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Introduction

In recent years, Indonesia¹⁶ along with the rest of the world is struggling with the coronavirus pandemic. Since its first appearance in Wuhan, China, 2019, the virus has spread to almost every country⁵⁰. According to the World Health Organization (WHO), the coronavirus continued to spread with a 12% increase in mid-July 2021. Globally, 180 countries reported the appearance of the Alpha variant of SARS-CoV-2, while fewer countries reported other variants (Beta, Gamma, and Delta). The global number of new cases was more than 3.4 million with almost 57,000 deaths as of July 2021 (World Health Organization, 2021). In Indonesia, the number of patients with confirmed positive COVID-19 test was increasing day by day, especially with the appearance of a highly infectious strain, the Delta variant. The government of Indonesia has made various efforts to curb the outbreaks²⁵. One of them is the Policy of Emergency Public Activity Restrictions (PPKM)¹. Among regions severely affected by the coronavirus in Indonesia, Jakarta reported an upsetting spike of COVID-19 infections and death rates in June 2021 (Loasana, 2021).

The PPKM policy is expected to improve the effectiveness of physical distancing measures. Among other things, the PPKM policy urges government offices, schools, and private companies to shift their operations to the online mode. All companies are asked to comply with the government regulations so that they can carry out their activities from home. However, certain areas remain open to fulfil the basic needs of the community. For example, organizations in the health sector, food or basic needs sector, energy sector, financial services sector, and the payment system may continue operating from their offices (Gorbiano et al., 2021).

The Work from Home (WFH) policy has led to changes in the way people carry out their activities, introducing what is often called “the new normality” in the community. People are now using online media, such as Zoom² or Skype³ for meetings and education instead of conducting face-to-face meetings. The PPKM policy’s steps aimed at curbing the transmission of the virus, include 3Ms: wearing masks (*memakai masker*), maintaining distance (*menjaga jarak*), and washing hands with running water and soap for 20 seconds (*mencuci tangan*). The 3Ms are widely promoted by the Indonesian government on all levels.

Although the campaign continues, its efficiency decreases (Mufarida, 2020). The level of compliance in Indonesia has only reached 59.20%, especially during the long holidays. There has also been a slackening in the discipline regarding the 3Ms. Given the pessimism among the communities regarding the government’s efforts to deal with the pandemic, promotion of a healthy lifestyle and hygienic rules should be high on the government’s agenda. The campaign promoting the 3Ms

¹ PPKM stands for *Pemberlakuan Pembatasan Kegiatan Masyarakat*, which means restrictions to community activities starting from July 3 to July 20, 2021.

² Zoom is a trademark of Zoom Video Communications, Inc.

³ Skype is a registered trademark of the Microsoft group of companies.

involves mass media and social media channels, especially Instagram⁴, Facebook⁵, YouTube⁶, and WhatsApp⁷.

In social media, the PPKM is referred to as a health protocol (*prokes*). Social media have a great potential in getting the message across to the public, since the number of social media users in Indonesia continues to grow. According to Hootsuite data (Digital 2021: Indonesia, 2021), there are 160 million active social media users and 175.4 million Internet users in the country. In 2021, the total population of Indonesia is estimated to be 272 million. Active social media users can undoubtedly help spread the messages more personally and more quickly. The implementation of WFH or online education activities also encourages more active social media use. People are still interacting with each other even though they stay at home.

The number of WhatsApp and Instagram users has multiplied during the COVID-19 pandemic from 64.8% in 2018 to 73.7% in 2020 (APJII, 2020). WhatsApp is used most frequently for communication (91.5%). According to KATADATA.co.id, social media use such as WhatsApp and Instagram experienced a spike of up to 40% (Burhan, 2020). This user upsurge happened because many people use social media to communicate with their colleagues, friends and relatives during the lockdowns. Moreover, according to the survey for Kantar, a consulting firm, its number of users is predicted to continue growing (COVID-19 Barometer, 2020). At the beginning of the pandemic, the global use of WhatsApp soared to 27% and then to 40%. The increase in the use of WhatsApp and Instagram occurred because many countries implemented lockdowns and restrictions during the pandemic. The public used these platforms to share news and important information related to the coronavirus. The information shared also varies, from links to news sites to posters or videos about preventing infections through a healthy lifestyle (*ola hidup bersih dan sehat, PHBS—clean and healthy lifestyle*).

There are few studies considering the mediating role of social media and family social capital, especially those that focus on healthy lifestyles, during the COVID-19 outbreaks. Previous studies tend to emphasize the need to promote a healthy lifestyle among rural communities, especially farmers or animal breeders. Ruyani and Gnagey (2018) found that the community living on the slopes of Wayang mountain typically disposes of the majority of household and cattle waste by dumping it directly into the Ciliwung river, thus this waste is not being treated at the special wastewater treatment plant. This study has also highlighted other alarming facts: for example, the processing equipment for turning cattle waste into biogas is damaged the presence of a communal septic tank is still an option. The study outlines alternative solutions to these problems, including public health education through mass media and other popular culture approaches as the means for social change in building synergy among the stakeholders.

Another study of interest was carried out by Habibi (2017), who focuses on the social cultural reality of hygienic and healthy living behavior practiced by the women

⁴ Instagram™ is a trademark of Instagram Inc., registered in the U.S. and other countries.

⁵ Facebook™ is a trademark of Facebook Inc., registered in the U.S. and other countries.

⁶ YouTube™ is a trademark of Google Inc., registered in the U.S. and other countries.

⁷ WhatsApp™ is a trademark of WhatsApp Inc., registered in the U.S. and other countries.

11 of Bhuana Jaya village. Using a descriptive qualitative approach, the results showed that the women of Bhuana Jaya village who follow the principles of a healthy lifestyle and hygiene procedures in their households enjoy a higher status in their families and communities. In addition, these women have Internet access to obtain health information.

There is also evidence of the impact of 4 social media use on family life. For example, Ellison et al. (2007) concluded that social media have successfully increased people's 10 self-confidence, especially among people with low self-esteem. The study reveals that interaction and strong ties with family members in social media boosts the user's self-confidence level. It thus reflects the high social capital. 4 should be noted, however, that the influence of social media on people's well-being is not always positive. For example, Kabasakal (2015) showed that social media use makes university students dissatisfied with life. The increasing predictors of problematic Internet use is highly dissatisfied with the poor family functioning. Thus, the problematic Internet use increased with the increasing life dissatisfaction of the university students.

In our study, we are going to focus on the role of women in the promotion of a healthy lifestyle: in Indonesia, mothers are responsible for the health and happiness of their families and they are also the ones who introduce new values and habits into family routines. Information related to the COVID-19 pandemic that reaches them will undoubtedly affect their choices when faced with uncertainties. We intend to investigate the relationship between the extent to which mothers in Indonesian families use social media, family social capital, and these women's awareness of the principles of healthy living.

For our sample, we selected 156 married female respondents through the snowball sampling method. The survey 37 was conducted in the second half of 2020 during COVID-19 pandemic. We asked the female respondents whose age was between 21 to 60 years old to complete the questionnaires, which were sent to them in an electronic form. Among 156 respondents, 46% of them are private employees. Others are entrepreneurs (13%) and civil servants (10%). 30% of the respondents chose not to reveal their profession.

23 This paper is structured as follows: the first section presents the theoretical background on communication, social media use, family social capital, and the creation of awareness through 34 social media. The methodology of the study will be explained in the following section. Then we will describe our model followed by the results of the empirical simulation using ordinary least squares (OLS) regression. Finally, the discussion and conclusion will be presented along with the possible research avenues.

Theoretical Background

Social Media Communication

Communication is a process of delivering messages from the sender of the message (sender) to the recipient of the message (receiver) with the aim to change attitudes or behavior. Messages are conveyed by using symbols both orally and in writing. Generally, communication is conducted face-to-face or through media, which allow senders to distribute messages to a broader audience and produce specific effects.

This definition does not consider communication process related to special cases, i.e., for people with disabilities.

In the context of media, there are various means to convey messages. They can be delivered through printed mass media such as books, magazines, and electronic media such as television, radio, and computer/Internet-based media. Currently, the use of Internet-based social media is in high demand since they help maintain interconnectedness, access to individual audiences as recipients and senders of messages; in addition, they are interactive and ubiquitous (McQuail, 2011), practical, cheap and convenient.

The characteristics of social media are related not only to the users (targeted audiences) but also to the technological features such as “likes”, “shares”, and “retweets”. Social share buttons can stimulate people to spread the news they received. The use of trending hashtags on Twitter® and Facebook can invite people to find the latest news easily and identify news topics, which are currently being discussed by searching them by region, country, and city (Parr, 2010).

Social media have become a widely used means of disseminating information, which changes the way people communicate. Setiadi (2016) demonstrated that, as a result of the development of Information and Communication Technologies (ICTs), social media have changed the ways of communicating in Indonesian communities. Despite the obvious advantages of social media use, however, they also have a negative side: Subramanian (2017) proved that young people exposed to social media are more isolated and show less respect towards the elders in their circle.

The use of social media to disseminate health information is also a common practice. Aptindika et al. (2019) conducted a study in Situbondo Regency that social media, such as Facebook, influence the dissemination of health information. They observed that the number of medical visits and visits to public health centers (*puskesmas*) increased with more exposure to social media.

An important observation was made by Rakhmat:

Exposure to impressions is defined as the use of media by the audience which includes the amount of time spent in various media, types of media, types of media content, media consumed and various relationships between audiences and media content consumed or with the media as a whole. (Rakhmat, 2004, p. 66)

Social media use can be measured in three ways: frequency, duration, and intensity. The frequency shows how routinely an individual accesses social media (Ardianto et al., 2004). The duration is related to the length of time individuals spend using social media. This parameter was used in a number of studies such as Duffet (2017), Gezgin (2018), Natalia & Agustina (2021). The intensity of social media use is the extent to which a person receives information from social media, reads information, reacts, and disseminates the information obtained through social media.

⁸ 2 Twitter® is a trademark of Twitter Inc., registered in the U.S. and other countries.

Social Media and Family Social Capital

The term “social capital” refers to relationships created through a series of networks and people who share values. By building relationships on an ongoing basis, people can work together to achieve goals that cannot be reached alone (Prayitno et al., 2019). Social capital is a set of values, norms, rules that are shared by members of a group involved in the process of social interaction.

In a family context, social capital becomes a necessity that must be owned to support harmony in a family. An empirical study in China shows that family social capital has a positive association with self-rated health at an older age in a rural Chinese community (Lu et al., 2021). Even in the absence of promotion of health-related behavior, support from the family is a significant determinant of self-rated health among older rural adults. Geraee et al. (2019) found that there are four aspects that can be used as a reference in looking at family social capital: family cohesion, family interaction, lack of family conflict, and family control. Family cohesion is defined as a form of closeness of family members to one another such as doing family activities together. Family interaction is a communication climate that is created within a family, such as openness, discussion, and interactions that occur in family relationships. The lack of family conflict becomes social capital in a family relationship, which can be characterized by the ability of the family to resolve conflicts. Family control is related to how family members have the ability to control other family members, such as a mother having control over family activities at home or a father having control over his role as head of the household.

There have been few studies related to social media and family social capital. Geraee et al. (2019) found that social media, which is very popular with the community of high schools in Isfahan Iran and is even perceived to reduce interactions in the family, actually only affects a part of family social capital and life satisfaction. Family factors, especially mothers, provide support for family members to develop and have life satisfaction (Chong & Baharudin, 2017). Khotimah et al. (2020) found that the factors of family social capital and cooperation with neighbours are needed to control the spread of COVID-19.

Health Awareness and Social Media Use

In communication, awareness is a result or effect of certain activities or sensations. Awareness is therefore regarded as the attitudes towards the stimulants that hit individuals.

Alteration in cognitive awareness is often observed in consumer behavior studies, such as the studies determining the effectiveness of a marketing message. Studies in marketing show that social media can spread messages and influence individuals (Sander & Lee Teh, 2019; Voramontri & Klieb, 2019). It includes both trustable messages and hoaxes. Research that measures changes in attitudes, awareness, and behavior can be found in the context of political campaigns through social media (Gibson, 2015; Kahne & Bowyer, 2018; Stier et al., 2018). These studies concluded that messages disseminated through social media can alter the awareness of the target audience.

Change in attitude and awareness goes through the stages of changing the cognitive, affective, and conative components (Azwar, 2010). The cognitive component corresponds to changes in the individual's beliefs based on their perceptions—seeing, hearing, or feeling (Sassenberg et al., 2005). The affective component is a change related to the individual's feelings about the received message. Feelings such as like and dislike, happy or not happy will determine the success of the following conative process. The conative perception is an individual's behavioral response to the received message. A change in behavior can occur when a person accepts the message as a result of logical reasoning. An understandable message leads to a sense of trust.

Based on the above, it can be concluded that messages conveyed through social media will alter the awareness of the target audience through the cognitive, affective, and conative components. The same principle applies to behavior changes in the face of the COVID-19 pandemic. It is likely that the awareness of the coronavirus will lead individuals to choose a healthier lifestyle. Patrão et al. (2017) found that different factors affect the choice of healthy lifestyles among men and women. Roy et al. (2020) and Salman et al. (2020) suggested that COVID-19 worries and behavior stemming from cognitive, affective and conative processes on the individual level are important factors for the dynamics of the pandemic.

The success of a message conveyed through social media can be assessed by measuring the achievement of cognitive, affective, and conative processes in the audiences.

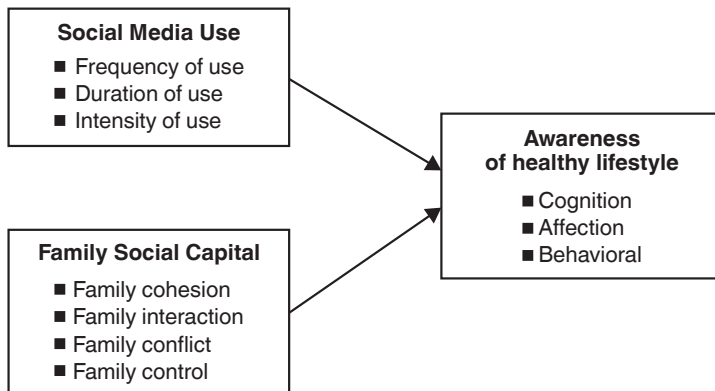
Methodology

This study uses a quantitative survey. The respondents are mostly married women (70%) who live in the greater Jakarta area. Others reside outside the greater Jakarta area. Women were the target of this study because they play a prominent role in the family and may reinforce certain values, habits or behavior patterns of family members.

These women voluntarily participated in this study and were willing to express their opinion. The sample was obtained by using the principle of non-probability sampling considering the number of unknowns. The Taro Yamane formula is used to determine the number of respondents for an infinite population and the precision level of 10% is 100 people.

This study uses a non-probability sampling technique, the snowball technique. The researcher distributed a Google form questionnaire to several respondents who were working mothers and agreed to participate in this study. They are referred to as the first-level respondents. Then, the first-level respondents passed the questionnaires on to others whom they also know and who meet the same criteria until the number reaches 100 people within a month. During this time, the number of returned questionnaires exceeded the expected number. In total, we received 169 responses. However, there were four incomplete responses, which were not included in the study. The analysis covered 165 responses.

This study uses a 5-point scale for each question ranging from "strongly disagree" (a), "disagree" (b), "neither agree nor disagree" (c), "agree" (d), and "strongly agree" (e).

Figure 1*Model Specification of Awareness of Healthy Lifestyle*

We used three main variables: ¹ social media use, family social capital, and awareness of a healthy lifestyle and hygienic principles. Social media use (x_1) measures the frequency of use, duration of use, and intensity of use, such as reading, commenting, and liking other people's posts, ⁷ sending or receiving pictures, text, videos, or music; checking other people's profile pictures, pages, posts, and stories. The studies performed by Ardianto et al. (2004), Brusilovskiy et al. (2016), and Rachmat (2004) used the same definition in the survey. The family social capital (x_2) is a development of the scale explored in the previous study by Geraee et al. (2019) covering aspects of family cohesion, family interaction, lack of family conflict, and family control. The awareness of a healthy lifestyle and hygienic principles (y) is intended to measure family members' level of cognition, affection, and behavioral tendencies that may affect the spread of the coronavirus. ⁴⁵ Table 1 shows the breakdown components of the primary variables from the survey. Since all components use the same Likert 5-point scale, the main variables are calculated from the average of each corresponding breakdown component.

Table 1*Components of Studied Variables*

¹ Social media use x_1	Family social capital x_2	Awareness of a healthy lifestyle y
Frequency of use $x_{1,a}$	Family cohesion $x_{2,a}$	Cognition tendency y_a
Duration of use $x_{1,b}$	Family interaction $x_{2,b}$	Affection tendency y_b
Intensity of use $x_{1,c}$	Lack of family conflict $x_{2,c}$	Behavioral tendency y_c
	Family control $x_{2,d}$	

The descriptive statistics for the three main variables in this survey are shown in Table 2. The mean value of x_1 is slightly higher than the mean value of x_2 , by 0.192. On average, the respondents engage with social media in moderation (within reasonable limits using the social media). From the responses of social media use, we found that the effectiveness of the dissemination of the message through social media tends not to depend on the number of times the message is distributed. The magnitude of information exposure to the audiences most likely affects the effectiveness of the dissemination of the message. We also found that the respondents are likely to have a high family social capital.

Table 2
Descriptive Statistics

Variable	Number of Observations	Mean	Standard Deviation	Min.	Max.
x_1	165	2.727	0.323	1	3.62
x_2	165	2.535	0.274	1.45	3.12
y	165	2.632	0.299	1.83	3

Model Specification

This study aimed to investigate the relationship between the awareness of a healthy lifestyle and hygienic principles, social media use, and family social capital. The awareness is modeled as a relationship between social media use and family social capital. Another study in the same discipline uses the same model specification hypothesizing that life satisfaction among adolescents is influenced by social media use and family social capital (Geraee et al., 2019). This study specifies two models: the first model represents a linear relationship with the independent variables "social media use" and "Family social capital", and the second model is similar to the first model, but includes the relationship between social media use and family social capital. The model specifications can be written as follows:

$$y_i = \beta_0 + \beta_1 x_{1,i} + \beta_2 x_{2,i} \dots \tag{1}$$

$$y_i = \beta_0 + \beta_1 x_{1,i} + \beta_2 x_{2,i} + \beta_3 (x_{1,i} \times x_{2,i}) \dots \tag{2}$$

where y_i is the dependent variable measuring the count of the respondent's family i with the level of awareness of a healthy lifestyle and hygienic principles, x_i is the use of social model in family i , and x_2 is the level of family social capital.

Results and Discussion

Correlation Matrix

Table 3 summarizes the correlation matrix for x_1 , x_2 , and y . Family social capital is positively correlated with awareness of a healthy lifestyle and hygienic principles with the coefficient of 0.7253 ($p < 0.005$). Social media use shows a similar correlation with the coefficient of 0.2032 ($p < 0.05$). A stronger family social capital tends to influence

awareness at a greater magnitude than the frequent use of social media. The high and low frequency of use, the duration of accessing social media, and the number of messages read do not significantly impact the level of awareness. Thus, ²social media only plays a role in delivering the information. It does not affect the individual's awareness of the coronavirus. Mukherjee et al. (2019) mention that digitalization creates the need to comprehend how social media affects people's beliefs and behaviors in relation to health. Asril et al. (2020) found that health ²⁰beliefs have a significant and positive correlation with a healthy lifestyle. The effectiveness of the delivered information depends on how the users (audiences) use the social media.

²⁸ **Table 3**
Correlation Matrix

	x_1	x_2	y
x_1	1.0000		
x_2	0.2006 0.0098	1.0000	
y	0.2032 0.0089	0.7253 0.0000	1.0000

⁴⁰ Social media use is positively correlated with the awareness of a healthy lifestyle and hygienic principles with the coefficient of 0.2006 ($p < 0.05$). The frequency, duration, and intensity of using social media ⁴⁴was significantly correlated with the strength of family social capital. This study, therefore, suggests that social media use can significantly enhance the family social capital. ¹⁸There is no evidence that social media use reduces the family social capital. The idea that social media use may disrupt the stability of the family social capital is not supported. In other words, family members who are active users of social media will not alienate themselves from their families.

Regression Results

Regression result model 1, where ²⁶there is no relationship between the use of social model (x_1) and the family social capital (x_2), yielded an r -squared value of 52.96%. The test showed ¹⁵that there is a positive and significant relationship between the level of awareness and family social capital ⁵ $r = 0.7801$, $p < 0.005$. Family social capital plays a role in determining the level of awareness. ⁴²The coefficient of determination of this relationship is about 0.7801, which indicates ⁵that the influence of social capital on the level of awareness is quite strong. There is no conclusion regarding the interaction between the level of awareness and use of social media ⁵ $r = 0.0557$, $p > 0.05$.

Certain aspects of family social capital such as cohesiveness, lack of conflict, family control, and harmony seem to contribute to the level of awareness of a healthy lifestyle and hygienic principles. These findings show that the role of family social capital components cannot be neglected because they have equally important roles. It should be noted that the definition of family in Indonesia might not be only limited to blood and in-law relationships. The cultural aspect should be carefully considered so that it will not be mistaken with neighbourhood social capital (Alvarez et al., 2017).

Table 4
Ordinary Least-Square Regressions

Awareness of a healthy lifestyle (y)	Model 1	Model 2 With interaction x_1 and x_2
Use of social media (x_1)	0.0557326 0.0509921 0.276	0.3182074 0.426754 0.457
Family social capital (x_2)	0.7801448 0.601592 0.000	1.061997 0.4589382 0.222
Interaction use of social media and family social capital ($x_1 * x_2$)	–	–0.1025049 0.1654646 0.536
Constant	0.5023016 0.1853198 0.007	–0.2175454 1.176713 0.854
Number of observations	165	165
r-squared	0.5296	0.5307
Adj. r-squared	0.5328	0.5220

Note. Regression coefficients are in the first row, standard errors are in the second row, and p -values are in the third row.

Table 5
Correlation Matrix for Family Social Capital and Awareness of a Healthy Lifestyle

	$x_{2,a}$	$x_{2,b}$	$x_{2,c}$	$x_{2,d}$	y_a	y_b	y_c
$x_{2,a}$	1.0000						
$x_{2,b}$	0.7002 0.0000	1.0000					
$x_{2,c}$	0.5727 0.0000	0.6568 0.0000	1.0000				
$x_{2,d}$	0.5451 0.0000	0.5589 0.0000	0.5627 0.0000	1.0000			
y_a	0.5399 0.0000	0.5986 0.0000	0.5990 0.0000	0.5233 0.0000	1.0000		
y_c	0.5087 0.0000	0.5440 0.0000	0.5639 0.0000	0.5639 0.0000	0.7475 0.0000	1.0000	
y_c	0.5451 0.0000	0.5489 0.0000	0.5038 0.0000	0.5869 0.0000	0.6795 0.0000	0.7813 0.0000	1.0000

Even so, it is suggested that social media are still influential as a medium for disseminating and delivering information about a healthy lifestyle and hygienic principles. In exploring a deeper correlation between family social capital and the awareness of a healthy lifestyle, this study found that that these components are significant ($p < 0.001$) and positively correlated. This finding is consistent with the study conducted by Alvarez at al. (2017), who found that family social capital has

a distinct effect on family health. The awareness and positive perception living amid COVID-19 can undoubtedly promote better family health.

Regression result model 2, showing the relationship between social media use (x_1) and family social capital (x_2), yielded a better r -squared value than model 1, accordingly 53.07% and 52.96%. However, no conclusion can be made because of the absence of a significant correlation ($p < 0.01$). It may be explained by the fact that the level of awareness of the respondents may have already been high when the questionnaire was distributed, as a result, the relationship between social media use and family social capital was negligible.

Conclusion

As the number of cases of COVID-19 continues to increase, especially with the emergence of new variants, the importance of health protocols and their promotion is growing. This study focuses on the impact of social media use and family social capital on Indonesian people's awareness of the need to choose a healthy lifestyle and follow hygiene and sanitation principles. One of the ways of getting this message across to people may be the social media. However, the effectiveness of this information channel depends on how people use social media.

The role of the mother in the family is very important since she can influence the choices other members of the family make regarding their lifestyles and adherence to the principles of hygiene. Moreover, such aspects of the family as care, cohesiveness, and cooperation are also important aspects of behavior change. Family social capital is a medium for catalyzing the changes in daily family behavior.

Using the snowball survey, this study observes that the level of family social capital is significantly correlated with a better awareness of living amid the coronavirus. Families with strong bond are more likely to have healthy lifestyle in stopping COVID-19 spread. The care from the family members helps other family members to cope in uncertain situations. They share useful information among their members to maintain the wellbeing. Thus, they tend to follow government campaigns such as 3M campaign (wearing masks, maintaining distance, and washing hand) and PBHS (clean and healthy lifestyle). Through family control, mothers ensure that other family members follow these routines. Any choices made in the family during pandemic are taken by considering the principle of hygiene. On the other side, no statistical evidence is found in this study between the social media use and the awareness toward healthy lifestyle during COVID-19 pandemic.

Our research findings may of interest to policymakers seeking to devise measures and solutions to survive in the middle of the coronavirus pandemic. Future research in this area may examine other factors affecting people's awareness of the principles of hygiene or the ways of promoting such principles on the state level. Moreover, since the notion of family social capital is multifaceted and multidimensional, there are still many opportunities for researchers to interpret and measure family social capital.

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Appendix
Questionnaire

Demography
(1) Where do you live?
(2) How old are you?
(3) How much money do you spend monthly?
(4) What is your marital status?
(5) How long have you been married?
(6) What is your current occupation?
(7) How many children do you have?
Social Media Use
(1) How often do you use WhatsApp during COVID-19 pandemic?
(2) How often do you use Facebook during COVID-19 pandemic?
(3) How often do you use Instagram during COVID-19 pandemic?
(4) How often do you use YouTube during COVID-19 pandemic?
(5) How often do you use Twitter during COVID-19 pandemic?
(6) How often do you use LINE during COVID-19 pandemic?
(7) How long (in hours) do you use social media daily?
(8) I use social media daily
(9) I rarely use social media daily
(10) I never use social media daily
(11) I spend most time in a day to surf social media
(12) I do not spend most time in a day to surf social media
(13) I use social media daily for a short time
(14) I actively received information, i.e., in text and video, about COVID-19 pandemic
(15) I read information from my acquaintances about COVID-19 pandemic when using social media
(16) I give LIKE for all information in any form, i.e., photos, pictures, and video, about COVID-19 pandemic when using social media
(17) I actively send information or comment on the posting about COVID-19 pandemic
(18) I forward information about COVID-19 pandemic
Family Social Capital
(1) I appreciate every family member that I feel "closer"
(2) My family does all household works together
(3) Family gathering or reunion is our favourite activity
(4) My family always go for leisure together
(5) Every family member has his or her own tasks for the household works
(6) My family often discuss or talk together
(7) I appreciate the transparency from other family members to strengthen the quality of our interaction

-
- (8) My family always spend time together during COVID-19 pandemic
 - (9) I appreciate the communication with other family members directly and indirectly (i.e., using social media)
 - (10) Whenever we discuss about private affairs, we do not discuss it openly
 - (11) If there is a disagreement, every family member is free to say his or her opinion
 - (12) Any family dispute can be resolved peacefully in our family
 - (13) Difference is normal even though it can lead to family dispute
 - (14) I observe that there is trust among family members
 - (15) I perceive that every family member knows other members' schedule
 - (16) As a mother, I have full control for arranging family activities at home
 - (17) I observe that every family member obeys to father
 - (18) I observe that every member greets each other to show concern
 - (19) Every family member reminds other family members to complete the activities
-

Awareness of Healthy Lifestyle

- (1) I understand health protocol during COVID-19 pandemic
- (2) I understand how to maintain a good health condition
- (3) I understand how to use hand sanitizer after touching surfaces in public space
- (4) I understand that viruses, bacteria, and germs can be found every where
- (5) I understand the benefit of using mask to prevent COVID-19 transmission
- (6) I like healthy living
- (7) I do healthy living even though it is not practical
- (8) I like reminding other family members to follow health protocol
- (9) I feel unhappy if I observe other family members do not use mask when going outside
- (10) I am happy if my family keep healthy lifestyle
- (11) I tend to remind continuously other family members to keep healthy lifestyle
- (12) I provide mask for other family members
- (13) I provide hand sanitizer for other family members
- (14) I provide hand wash facility in my premise
- (15) I make it a habit for every family member to wash their hands frequently
- (16) Every family member follows the rules of social distancing by keeping a distance from other people when outside the house
- (17) Every family member follows the rules of social distancing by avoiding crowds
- (18) Every family member throws away the bag or packaging before being brought into the house
- (19) After leaving the house, family member immediately takes shower and changes clothes
- (20) When bringing or receiving items from outside the house, family members firstly clean it with soap
- (21) When bringing or receiving goods from outside the house, family members firstly spray it with disinfectant

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